FORM D



SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

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hou	rs per	respor	ise	16.00

SEC USE ONLY							
Prefix	Serial						
DATE RECEIVED							
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The state of the s	
Name of Offering (check if this is an amendment and name has changed, and indicate	e change.)
Long Grove CLO Ltd Class D Fourth Priority Deferrable Floating Rate Notes due 20	016 and Preference Shares
Filing Under (Check box(es) that apply): ☐ Rule 504 ☐ Rule 505 ☒ Rule 506 ☐ S	Section 4(6) ULOE
Type of Filing: New Filing Amendment	25.20 11 2 2000
A. BASIC IDENTIFICATION DA	ATA . JUN 1/2/2009
1. Enter the information requested about the issuer	
Name of Issuer (check if this is an amendment and name has changed, and indicate cl	
Long Grove CLO Ltd.	(A) 87 /8/
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Egde)
Queensgate House, S. Church St., George Town, Grand Cayman, Cayman Islands	(345) 945-7099
Address of Principal Business Operations (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
(if different from Executive Offices) same	same
Brief Description of Business Special purpose investment vehicle	
Type of Business Organization	
corporation limited partnership, already formed	other (please specify):
☐ business trust ☐ limited partnership, to be formed	limited liability compan DDOCFSSED
Month Year	
Actual or Estimated Date of Incorporation or Organization: 0 2 0 4	
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbrev	viation for State:
CN for Canada; FN for other foreign jurisc	diction) FN THOMSON

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et sea, or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

A. BASIC IDENTIFICATION DATA 2. Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer; Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. Check Box(es) that Apply: Promoter Executive Officer ☐ Beneficial Owner □ Director General and/or Managing Partner Full Name (Last name first, if individual) White, Phillipa Business or Residence Address (Number and Street, City, State, Zip Code) c/o Maples Finance Limited, P.O. Box 1093GT, Queensgate House, South Church Street, George Town, Grand Cayman, Cayman Islands Check Box(es) that Apply: Promoter ☐ Beneficial Owner Executive Officer □ Director General and/or Managing Partner Full Name (Last name first, if individual) Major, Guy Business or Residence Address (Number and Street, City, State, Zip Code) c/o Maples Finance Limited, P.O. Box 1093GT, Queensgate House, South Church Street, George Town, Grand Cayman, Cayman Islands ☐ Beneficial Owner ☐ Executive Officer □ Director General and/or Managing Partner Full Name (Last name first, if individual) Ebanks, Wendy Business or Residence Address (Number and Street, City, State, Zip Code) c/o Maples Finance Limited, P.O. Box 1093GT, Queensgate House, South Church Street, George Town, Grand Cayman, Cayman Islands ☐ Beneficial Owner ☐ Executive Officer □ Director Check Box(es) that Apply: Promoter General and/or Managing Partner Full Name (Last name first, if individual) Shifflet, Allen Business or Residence Address (Number and Street, City, State, Zip Code) c/o Maples Finance Limited, P.O. Box 1093GT, Queensgate House, South Church Street, George Town, Grand Cayman, Cayman Islands Check Box(es) that Apply: Promoter ☐ Beneficial Owner Executive Officer ☐ Director Managing Partner Full Name (Last name first, if individual) Maples Secretaries Limited Business or Residence Address (Number and Street, City, State, Zip Code) c/o Maples Finance Limited, P.O. Box 1093GT, Queensgate House, South Church Street, George Town, Grand Cayman, Cayman Islands Check Box(es) that Apply: Promoter Beneficial Owner ☐ Executive Officer ☐ Director General and/or Managing Partner Full Name (Last name first, if individual) **Maples Finance Limited** Business or Residence Address (Number and Street, City, State, Zip Code) P.O. Box 1093GT, Queensgate House, South Church Street, George Town, Grand Cayman, Cayman Islands Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer ☐ Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code)

	4			B. IN	NFORMAT	ION ABO	UT OFFEI	RING				
1 II4b-				- d 411 +		مرددان المحددات					Yes	No
1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?								\boxtimes				
2. What is the minimum investment that will be accepted from any individual?							\$250,000.00					
												2.7
3. Does th	ne offering p	ermit joint	ownership (of a single ι	ınit?	•••••		•••••		*************	Yes	No □
			ted for each									
			ration for so ciated perso									
			oker or deal									
			forth the inf	ormation fo	r that broke	er or dealer	only.					
	(Last name		•									
Banc of A	merica Sec	urities LLC										
			Number and	Street, City	y, State, Zip	Code)			*******			
9 West 57'	th Street, N	ew York, N	Y 10019									
Name of A	ssociated B	roker or De	ealer				2000					
States in W	Vhich Perso	n Listed Ha	s Solicited o	or Intends to	o Solicit Pu	rchasers	· · · · · · · · · · · · · · · · · · ·			·		
(Check "	All States" o	or check ind	lividual Stat	es)								. 🛛 All States
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[MT] [RI]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA] [PR]
	[SC]	[SD]	[TN]	[TX]	[UT] ————	[VT]	[VA]	[WA]	[WV]	[WI] ———	[WY]	
Full Name	(Last name	first, if ind	ividual)									
Business o	r Residence	Address (1	Number and	Street City	v State Zin	(Code)						
Dusiness c	n residence	Aradicss (1	vamoer and	oucei, en	y, otate, 21p	(Code)						
Name of A	Associated E	roker or De	ealer									
States in V	Vhich Perso	n Listed Ha	s Solicited (or Intends t	o Solicit Pu	rchasers						
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[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full Name	(Last name	first, if ind	lividual)									
Business o	or Residence	Address (1	Number and	Street, Cit	y, State, Zip	Code)					<u></u>	
Name of A	Associated E	Broker or Do	ealer									
States in V	Which Perso	n Listed Ha	s Solicited	or Intends t	o Solicit Pu	rchasers						
			dividual Sta									🔲 All States
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[MT]	[NE]	[NV]	[NH] [TN]	[NJ] [TX]	[NM] [LIT]	[NY] [VT]	[NC] [VA]	[ND] [WA]	[OH] [WV]	(OK)	[OR] [WY]	[PA] [PR]

1. Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \(\infty\) and indicate in the columns below the amounts of the securities offered for exchange and already exchanged. Aggregate Amount Already Type of Security Offering Price Sold Debt \$6,000,000.00 \$6,000,000.00 Equity \$3,550,000,00 \$3,550,000.00 ☐ Common ☐ Preferred Convertible Securities (including warrants) \$0.00 \$0.00 Partnership Interests \$0.00 \$0.00 Other (Specify \$0.00 \$9,550,000.00 Answer also in Appendix, Column 3, if filing under ULOE. 2. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero." Aggregate Number Dollar Amount Investors of Purchases Accredited Investors 8 \$9,550,000.00 Non-accredited Investors 0 \$0.00 Total (for filings under Rule 504 only)..... Answer also in Appendix, Column 4, if filing under ULOE. 3. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1. Type of Dollar Amount Type of offering Security Sold Rule 505 Regulation A Rule 504 4. a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fees..... \$0.00 Printing and Engraving Costs Ø \$138.8<u>8</u> Legal Fees \boxtimes \$30,825.21 Accounting Fees. \boxtimes \$1,530.30 Engineering Fees \$0.00 Sales Commissions (specify finders' fees separately) \boxtimes \$191,000.00 Other Expenses (identify) miscellaneous administrative fees and expenses 冈 \$44,048.80 \boxtimes Total \$267,543.19

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

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	C. OFFERING PRICE,	NUMBER OF INVESTORS, EXPENSES AN	D U	SE OF PRO	OCEEDS			
	b. Enter the difference between the aggregate of and total expenses furnished in response to Part C proceeds to the issuer."	- Question 4.a. This difference is the "adjusted	gros				<u>\$9,282,456.81</u>	
i. Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C - Question 4.b above.								
	Total in response to 1 air c - Question 4.0 above.			Paymer Office Directo Affilia	ers, rs, &		Payments to Others	
	Salaries and fees			\$0.00			\$0.00	
	Purchase of real estate			\$0.00		\Box	\$0.00	
		nachinery and equipment		\$0.00			\$0.00	
		facilities		\$0.00_			\$0.00	
	Acquisition of other business (including the va		_	φυ.υυ_			φο.σο	
	offering that may be used in exchange for the a	•						
	issuer pursuant to a merger)			\$0.00			\$0.00	
	Repayment of indebtedness			\$0.00			\$0.00	
	Working capital			\$0.00			\$0.00	
	Other (specify): Purchase (or pay off loans inc	curred by the Issuer to purchase) a						
	portfolio of certain securities or loans and to	make an initial required deposit						
	into an interest reserve account.			\$0.00		\boxtimes	\$9,282,456.81	
	Column Totals			\$0.00		\boxtimes	\$9,282,456.81	
	Total Payments Listed (column totals added)			\boxtimes	\$9,282,·	<u>456.</u>	31	
		D. FEDERAL SIGNATURE						
sig	e issuer has duly caused this notice to be signed by mature constitutes an undertaking by the issuer to formation furnished by the issuer to any non-accredit	urnish to the U.S. Securities and Exchange Com	miss	ion, upon wi				
SS	uer (Print or Type)	Signature		Date	e .			
Lo	ng Grove CLO Ltd.	I WAIK			6/10	104	·	
Na	me of Signer (Print or Type)	Title of Signer (Print or Type)						
Pŀ	ilippa White	Director and Authorized Signatory for and on behalf of the Issuer						

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)